

1-18-02

UTILITY PATENT APPLICATION TRANSMITTAL	
<i>Submit an original and a duplicate for fee processing</i> <i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>	
ADDRESS TO:	Attorney Docket No. 90,663-QQ First Named Inventor Yatvin Express Mail No. EL904275623
APPLICATION ELEMENTS	
1. <input checked="" type="checkbox"/> Transmittal Form with Fee 2. <input checked="" type="checkbox"/> Specification (including claims and abstract) [Total Pages 50] 3. <input checked="" type="checkbox"/> Drawings [Total Sheets 14] 4. <input checked="" type="checkbox"/> Oath or Declaration [Total Pages] a. <input type="checkbox"/> Newly executed b. <input checked="" type="checkbox"/> Copy from prior application [Note Boxes 5 and 18 below] i. <input type="checkbox"/> <u>Deletion of Inventor(s)</u> Signed statement attached deleting inventor(s) named in the prior application 5. <input checked="" type="checkbox"/> Incorporation by Reference: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. 6. <input type="checkbox"/> Computer Code Listing (See 1.96) a. <input type="checkbox"/> Microfiche Appendix b. <input type="checkbox"/> CD-Rom (in duplicate, with separate transmittal) 7. <input checked="" type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission a. <input type="checkbox"/> Computer Readable Copy b. <input checked="" type="checkbox"/> Paper Copy c. <input type="checkbox"/> Statement verifying above copies 8. <input checked="" type="checkbox"/> Small Entity Status <input type="checkbox"/> is claimed <input type="checkbox"/> Statement filed in prior application; status still proper and desired <input type="checkbox"/> is no longer claimed. 18. <input checked="" type="checkbox"/> This is a CONTINUING APPLICATION. Please note the following: a. <input checked="" type="checkbox"/> This is a <input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part of prior application 09/573,497. b. <input type="checkbox"/> Cancel in this application original claims of the prior application before calculating the filing fee. (At least one claim must remain.) c. <input checked="" type="checkbox"/> Amend the specification by inserting before the first line the sentence: This is a <input type="checkbox"/> continuation <input checked="" type="checkbox"/> divisional <input type="checkbox"/> continuation-in-part of application Serial No. 09/573,497. d. <input checked="" type="checkbox"/> The prior application is assigned of record to Oregon Health and Sciences University.	
ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers 10. <input type="checkbox"/> Power of Attorney 11. <input type="checkbox"/> English Translation Document (if applicable) 12. <input type="checkbox"/> Information Disclosure Statement (IDS) <input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Copies of IDS Citations 13. <input type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (Should be specifically itemized) 15. <input type="checkbox"/> Certified Copy of Priority Document(s) 16. <input type="checkbox"/> A Request for non-publication pursuant to 35 U.S.C. § 122(b)(2)(B)(i) 17. <input type="checkbox"/> Other:	

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APPLICATION FEES

BASIC FEE				\$ 740.00
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE	
Total Claims	25	-20=	5	x \$18.00 \$ 90.00
Independent Claims	1	- 3=		x \$84.00 \$
<input type="checkbox"/> Multiple Dependent Claims(s) if applicable				+\$280.00 \$
				Total of above calculations = \$ 830.00
				Reduction by 50% for filing by small entity = \$(415.00)
<input type="checkbox"/> Assignment fee if applicable				+ \$40.00 \$
				TOTAL = \$ 415.00

19. Please charge my Deposit Account No. 13-2490 in the amount of \$415.0020. A check in the amount of \$ is enclosed.

21. The Commissioner is hereby authorized to credit overpayments or charge any additional fees of the following types to Deposit Account No. 13-2490:

- a Fees required under 37 CFR 1.16.
- b. Fees required under 37 CFR 1.17.
- c Fees required under 37 CFR 1.18

22. The Commissioner is hereby generally authorized under 37 CFR 1.136(a)(3) to treat any future reply in this or any related application filed pursuant to 37 CFR 1.53 requiring an extension of time as incorporating a request therefor, and the Commissioner is hereby specifically authorized to charge Deposit Account No. 13-2490 for any fee that may be due in connection with such a request for an extension of time.

23. CERTIFICATE OF MAILING

I hereby certify that, under 37 CFR § 1.10, I directed that the correspondence identified above be deposited with the United States Postal Service as "Express Mail Post Office to Addressee," addressed to the Asst. Commissioner for Patents, Box Patent Application, Washington, DC 20231, on the date indicated below.

24. USPTO CUSTOMER NUMBER



20306

PATENT TRADEMARK OFFICE

McDonnell Boehnen Hulbert & Berghoff

25. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name	Kevin E. Noonan
Reg. No.	35,303
Signature	
Date	January 15, 2002

UTIL (Rev. 11/21/00)